



**California Secretary of State
BALLOT DESIGNATION WORKSHEET**

(Elections Code §§ 13107, 13107.3, 13107.5; California Code of Regulations § 20711)

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This entire form **must be completed**, or it will not be accepted and you will **not** be entitled to a ballot designation. **DO NOT LEAVE ANY RESPONSE SPACES BLANK.** If information requested is not applicable, please write "N/A" in the space provided, otherwise the information **MUST** be provided. **UPON FILING, THIS WORKSHEET WILL BE A PUBLIC RECORD.**

CITY OF COSTA MESA
BY BG

**Candidate
Information**

1

Candidate Name: Hengameh Abraham Gender (optional, for translation use only): Female
Office: City Council Email: h.seyraf@gmail.com
Home Address: 2151 Orange Ave. #D, Costa Mesa, CA, 92627
Mailing Address: 2151 Orange Ave. #D, Costa Mesa, CA, 92627
Business Address: 779 W. 19th St. Unit F, Costa Mesa, CA, 92627
Phone Number(s): 949-688-0811 Home/Mobile: 949-294-2584 Fax: N/A
Business:

**Attorney
Information**

2

Attorney Name (or other person authorized to act on your behalf): N/A
Address: N/A
Phone Number(s): N/A Mobile: N/A Fax: N/A
Business: N/A

You may select as your ballot designation one of the following designations:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a slash ("/")].
- (b) The full title of the public office you currently occupy and to which you were elected.
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to the same office or to some other office.
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, you are a candidate for the same office that you hold) to your current public office and seek election to the same office.
- (e) "Appointed Incumbent" if you were appointed to your current elective public office and seek election to the same office.

**Proposed
Ballot
Designation(s)**

3

Proposed Ballot Designation(s): Businesswoman / Wellness Coach
Alternate Ballot Designation(s) 1: Wellness Coach / Businesswoman
Alternate Ballot Designation(s) 2:

In the spaces provided on the next page(s):

- (a) Describe why you believe you are entitled to use the proposed ballot designation.
- (b) If your proposed ballot designation contains one or more slashes ("/") separating words in your ballot designation for separate principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.
- (c) Attach any documents or exhibits that you believe support your proposed ballot designation.
- (d) If using the title of an elective office, attach a copy of your certificate of election or appointment.
- (e) Any supporting documents will not be returned to you. **Do not submit originals.**

It is your responsibility to justify your proposed ballot designation and to provide all requested details.

If your proposed ballot designation includes the word "volunteer," indicate the title of your volunteer position and the name of the entity for which you volunteer along with a brief description of the type of volunteer work you do and the approximate amount of time involved. You may only use the ballot designation "community volunteer" if you volunteer for a 501(c)(3) charitable, educational, or religious organization, a governmental agency or an educational institution. You may not use "community volunteer" together with another designation.



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If your proposed ballot designation contains one or more slashes ("/") separating multiple principal profession(s), vocation(s), or occupation(s) (collectively known as "PVOs"), complete a justification section for each separate PVO.

Justification
for use of
Proposed
Ballot
Designation(s)
If you are
proposing
alternate ballot
designations,
please provide
justification for
use of those on
Page 3.

4

Justification for use of 1st PVO:

Owner of House of Medicine

Current or most recent job title: Life/Wellness coach Start/End Dates: 6/1/2019

Employer Name or Business: House of Medicine

Person who can verify this information:

Name: Brad Abraham Phone Number(s): 949-274-6956 Email: Bradabe@gmail.com

Justification for use of 2nd PVO:

Master life coach certified through Transformation academy

Current or most recent job title: Wellness Coach Start/End Dates: 6/15/2020

Employer Name or Business: House of Medicine

Person who can verify this information:

Name: Brad Abraham Phone Number(s): 949-274-6956 Email: Bradabe@gmail.com

Justification for use of 3rd PVO:

Current or most recent job title: Start/End Dates:

Employer Name or Business:

Person who can verify this information:

Name: Phone Number(s): Email:

Before signing below, answer/initial the following questions. Does your proposed ballot designation:

- | | | |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|-------------------|
| 1) Use only a portion of the title of your current elected office? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 2) Non-judicial candidates: Use only the word "Incumbent" for an elective office to which you were appointed? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 3) Use more than three total words for your principal professions, vocations, or occupations? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 4) Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 5) Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation, or occupations? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 6) Abbreviate the word "retired"? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 7) Place the word "retired" after the words it modifies? Example: Accountant, retired | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 8) Use an word or prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation, or occupation? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 9) Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 10) Use the name of a political party or political body? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 11) Refer to a racial, religious, or ethnic group? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |
| 12) Refer to any activity prohibited by law? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Initial <u>HA</u> |

If the answer to any of these questions is "yes," your proposed ballot designation is likely to be rejected.

X


08 / 03 / 2020

Candidate's Signature Date Signed: Month Day Year

For your reference, attached are Elections Code sections 13107, 13107.3, and 13107.5, and California Code of Regulations (CCR), title 2, section 20711. You also may wish to consult CCR, title 2, sections, 20712-20719 (found at www.sos.ca.gov).